0/02 UST C015	KDHE Refere	nce No.: Owr	ner I.D	Facility I.D		
Manual Tank Gau	uging 90-Da	av Summa	arv			
Note: Please attach co				For KDHE U	SE ONLY:	
results for Janu		0 0	J			
Submit to: Kansas	Department of I	Monthly Monitoring	yes	no		
Bureau (of Environment	Results for 1 month	Results for 1 monthyes			
Storage	Tank Section	Inventory Control* yes		_no		
	/ Jackson, Suite	Leak Check _	yes	_no		
	KS 66612-1367		yes	_no		
Please Print Clearly or Type		Signed				
Essility Information				Date		
 Facility Information A. Facility Name 	۵٠					
•				•		
B. Facility Addre	ss:					
	(street) (city)			(state)	(zip)	
C Contact Perso	n:			Phone: (
					,	
. Owner Information						
B. Owner Addres	ss:				 	
	`	street)	(city)	(state)	(zip)	
C. Contact Person	on:			Phone: ()	
II. Substances Stored (oline (including alcohol)	" used oil	" othe
If other, list con	tents of tank					
V. Inventory Control*.						
Otherwise, please send o	copies of your inv	entory Contro	Records for 30	days to KDHE after the	first month of	operation.
/. Tank System Tested	Give total capac	sity of tank				
. Talik System Testeu	Give total capat	Ity Of talik	<u> </u>	(4) If UCT doop not	-4	il aand
KDHE tank no.	Month:	Month:	Month:	(1) If UST does not		
NOTIL CAIR NO.				copies of your Inventory Control Records for 30 days to KDHE after the first month		
Iona chaot nor IICTI	Yr:	Yr:	Yr:	of operation.		
Average difference between				or operation.		
tank stick readings before						
and after rest periods (gals)				(2) Send 90-Day Su		
Pass/Fail (see section IV)	Pass Fail	Pass Fail	Pass Fail	after the first 90 da	ys ot operati	on.
, ,			•			

Fail tank when standard exceeded:	Use	ed Oil	Other Regulated Substances		
Nominal tank capacity in gallons	Weekly (One test)	Monthly Average (of four tests)	Weekly (One test)	Monthly Average (of four tests)	
550 or less	10 gallons	5 gallons	10 gallons	5 gallons	
551 thru 1000	13 gallons	7 gallons	13 gallons	7 gallons	
1001 thru 2000	26 gallons	13 gallons	not allowed	not allowed	

V. Please contact KDHE within 24 hours if your tank system has failed. Please direct questions regarding tank tests to KDHE, Storage Tank Section, 785-296-8061.